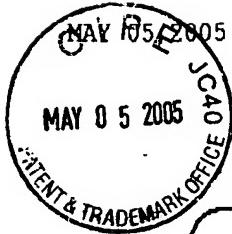


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PTO/SB/02 (04-05)

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10721325
Filing Date	NOV 20, 2003
First Named Inventor	TASHERRN WATKINS
Art Unit	37163
Examiner Name	Catherine Williams
Attorney Docket Number	22385

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number:

OR

Firm or
Individual Name: Tasherrn Watkins

Address: 39 Naylor Ave.

City: Clementon

State: NJ

Zip: 08021

Country: US

Telephone: 256-784-6714

Email:

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature: Tasherrn Watkins

Name: Tasherrn Watkins

Date: 5/5/05

Telephone: 256-784-6714

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

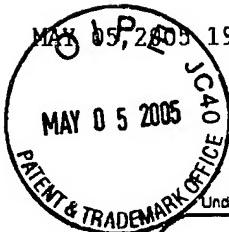
This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/122 (04-05)

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Application

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10721325
Filing Date	NOVember 26, 2003
First Named Inventor	Tashawn Watkins
Art Unit	3743
Examiner Name	Catherine Williams
Attorney Docket Number	22385

Please change the Correspondence Address for the above-identified patent application to:

The address associated with
Customer Number:

OR

Firm or
Individual Name Tashawn Watkins

Address 39 Naylor Ave

City <u>Clementon</u>	State <u>NJ</u>	Zip <u>08021</u>
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Country <u>US</u>

Telephone <u>856-724-6714</u>	Email <u></u>
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- Applicant/Inventor
- Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or agent of record. Registration Number _____
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature Tashawn WatkinsTyped or Printed Name Tashawn WatkinsDate 51 5105Telephone 856-724-6714

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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